## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                    |   |   |                 |              |                               |                  |          | SMALL ENTITY TYPE ( |                                       |         | OTHER THAN          |                        |
|---|---|---|-----------------|--------------|-------------------------------|------------------|----------|---------------------|---------------------------------------|---------|---------------------|------------------------|
| TOTAL CLAIMS  |   |   | w               |              |                               |                  |          | RATE                | FEE                                   |         | RATE                | FEE                    |
| FOR   |   |   | NUMBER FILED    |              | NUMBER EXTRA                  |                  |          | BASIC FEE           | 355.00                                | OR      | BASIC FEE           | · 710.00               |
| TO  | TAL CHARGEA   | BLE CLAIMS                                | 70 minus 20=    |              | •                             |                  |          | X\$ 9=              |                                       | OR      | X\$18=              |                        |
| IND   | EPENDENT CL   | AIMS                                      | 3 minus 3 =     |              | •                             |                  |          | X40=                | . 0                                   | OR      | X80=                |                        |
| MU  | LTIPLE DEPEN  | DENT CLAIM PI                             | RESENT          |              |                               |                  |          | +135=               |                                       | OR      | +270=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in o |   |   |                 |              |                               | olumn 2          | į        | TOTAL               |                                       | OR      | TOTAL               | 710                    |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)      |   |   |                 |              |                               |                  | <u>.</u> | SMALL E             | NTITY                                 | OR      | OTHER<br>SMALL      |                        |
| AMENDMENT A   | 8/12/05   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | PREVI        | BER                           | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE                |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | • 14                                      | Minus           | <b>.</b> .0  | 20                            | =                |          | X\$ 9=              |                                       | OR      | X\$18=              |                        |
|   | Independent   | NTATION OF MI                             | Minus ***       |              | 3<br>TCLAIM                   | = /              |          | X40=                | I a                                   | OR      | <b>288</b> -        |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /  |   |                 |              |                               |                  | J        | +135=               | ·                                     | OR      | 360<br>+270≡        |                        |
|   | *   |   |                 | * *          | ·                             | ·                | . '      | TOTAL<br>ADDIT, FEE |                                       | OR      | TOTAL<br>ADDIT, FEE | $\alpha$               |
| (Column 1) (Column 2) (Column 3)                                  |   |   |                 |              |                               |                  |          |                     |                                       |         | 7                   |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUM<br>PREVI | HEST<br>(BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE                |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | •   | Minus           | ••           | ٠.                            | =                |          | X\$ 9=              |                                       | OR      | X\$18=              |                        |
|   | Independent   | •.  | Minus           | ***          |                               | =                |          | X40=                |                                       | OR      | X80=                |                        |
|   | FIRST PRESE   | NTATION OF M                              | JLTIPLE DEF     | PENDEN       | TCLAIM                        | L                | ا ل      | +135=               | -                                     | OR      | +270=               |                        |
|   |   | :   | *               | *            |                               | *                | !        | TOTAL<br>ADDIT, FEE |                                       | OR.     | YOTAL<br>ADDIT, FEE |                        |
|   |   | (Column 1)                                |                 | (Colu        | mn 2)                         | (Column 3        |          | ADDIT. FEE          | ٠                                     |         | ADDN. I CE          |                        |
| AMENDMENT C   | *   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUA<br>PREVI | HEST<br>MBER<br>IOUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE                |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total   | •   | Minus           | **           |                               | =                |          | X\$ 9=              |                                       | OR      | X\$18=              |                        |
|   | Independent   |   | Minus           | ***          | T 01 A11                      | =                | 4        | X40=                |                                       | OR      | X80=                |                        |
| <b>L</b>  | PINST PRESE   | NTATION OF M                              | ULTIPLE DEI     | PENDEN       | I CLAIM                       |                  | ٍ ل      | +135=               | · · · · · · · · · · · · · · · · · · · |         | +270=               |                        |
| •   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." |   |                 |              |                               |                  |          |                     |                                       | OR      | TOTAL               |                        |
| ***   | If the "Highest Nu  | mber Previously P                         | aid For IN TH   | IS SPACE     | is less tha                   | an 3, enter "3." | •        | TOTAL<br>ADDIT. FEE |                                       | OR      | ADDIT. FEE          |                        |
|   | ine righest Nun   | nber Previously Pa                        | IO FOF (Total o | r Indepen    | oeni) is th                   | e rugnest num!   | ber fo   | und in the ap       | propriate bo                          | x in co | iumn 1.             | ,                      |